

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0131
Date:	5-25-21
Amount Paid:	\$300 2-25-21
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name: STEVE & TOMI BACKLUND				Mailing Address: SARIE				City/State/Zip: SARIE				Telephone: 309-772-8210			
Address of Property: 44295 MCNAUGHT RD				City/State/Zip: CABLE, WI 54821								Cell Phone:			
Contractor:				Contractor Phone:				Plumber:				Plumber Phone:			
Authorized Agent: (Person Signing Application on behalf of Owner(s)) KALL KASTROSKY				Agent Phone: 715 580-0157				Agent Mailing Address (include City/State/Zip): 14295 MCNAUGHT RD CABLE, WI 54821				Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
PROJECT LOCATION		Legal Description: (Use Tax Statement)						Tax ID# 23945		Recorded Document: (Showing Ownership) 2019R 5-78713					
1/4, 1/4		Gov't Lot 5		Lot(s) 142		CSM 512		Vol. & Page 357-358		CSM Doc #		Lot(s) #		Block #	
Section 7, Township 43 N, Range 5 W		Town of: NOMAKAGON		Lot Size		Acreage 15									

<input checked="" type="checkbox"/> Shoreland →	<input checked="" type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : 21 feet	Is your Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$20,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type:	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type:	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)			<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		Use	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>		<input checked="" type="checkbox"/> Year Round		<input type="checkbox"/> Compost Toilet	
					<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 19	Width: 21	Height: 14

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2 nd) Porch	(X)	
<input type="checkbox"/> Commercial Use		with a Deck	(X)	
		with (2 nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date)	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain)	(X)	
	<input type="checkbox"/>	Accessory Building (explain)	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain)	(X)	
	<input type="checkbox"/>	Special Use: (explain)	(X)	
	<input type="checkbox"/>	Conditional Use: (explain)	(X)	
	<input checked="" type="checkbox"/>	Other: (explain) BOATHOUSE	(19 x 21)	399

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
Authorized Agent: [Signature]
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date: 2/11/2021

Address to send permit 14295 MCNAUGHT RD CABLE, WI 54821

Attach
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of:

Proposed Construction
- (2) Show / Indicate:

North (N) on Plot Plan
- (3) Show Location of (*):

(*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show:

All Existing Structures on your Property
- (5) Show:

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*):

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*):

(*) Wetlands; or (*) Slopes over 20%

SEE ATTACHED

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
Setback from the Centerline of Platted Road	450 Feet		Setback from the Lake (ordinary high-water mark)	27' 10 Feet
Setback from the Established Right-of-Way	420 Feet		Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	1000 Feet			
Setback from the South Lot Line	200 Feet		Setback from Wetland	75' Feet
Setback from the West Lot Line	Feet		20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	425 Feet		Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	78' 80 Feet		Setback to Well	120 Feet
Setback to Drain Field	200 Feet			
Setback to Privy (Portable, Composting)	Feet			
Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.				
Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.				

(9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number:		# of bedrooms:		Sanitary Date:	
Permit Denied (Date):		Reason for Denial:					
Permit #: 21-0131		Permit Date: 5-25-21					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s)) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Mitigation Required Mitigation Attached		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Case #:		Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Was Parcel Legally Created Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Were Property Lines Represented by Owner Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record: Floodplain?						Zoning District (R-1) Lakes Classification (1)	
Date of Inspection: 3/9/21		Inspected by: [Signature]				Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.) Build as proposed + By FEMA Standards Abide by use of Boat House as per ordinance							
Signature of Inspector: [Signature]						Date of Approval: 5/25/21	
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>	



MAIL IS 1399.68'

2' ABOVE RFE=1397.68'



Boat house - 13-1-22

Flood plain 13-2-32 (c)

13-2-27 (6) (1) (2) (3) (4) (4)

13-2-32 (f)

58-3-21 - 2nd 1000

502 25-8-27

12-10-1000

(502 25-8-27) 1000

(502 25-8-27)

SES ONLY.

ARY HIGH
NOT BE

ER MARK
ECT TO
HAT IS
OF THE

OXIMATE

19'x21'
BOATHOUSE
SES ONLY. SETBACK
10' FROM
PARTMENT CHURCH

LOCATED IN
PROCESS + VIEWING
CORRIDOR

35.34'

171.42'
N 28°41'04" E
205.36'

S 89°49'39" W

LOT 1
71,100 SQ. FT.±
1.63 AC.±
RT. ANG. WIDTH = 150.1'

HOUSE

MOUND

SHED

GARDEN

LOT 2
610,900 SQ. FT.±
14.02 AC.±
INCLUDING ROAD R/W

N 42°47'19" E

33.94'
N 11°46'44" E
14.82'

N 89°49'39" E

416.18'

160.44'
S 20°30'25" W
192.47'

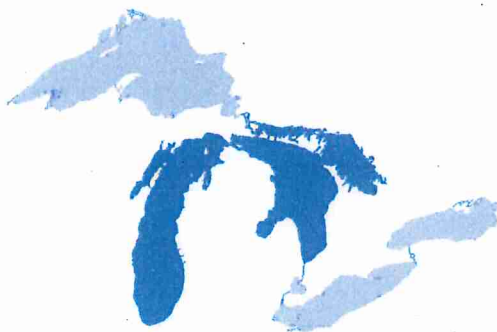
442.26'

32.03'
S 20°07'25" W
211.52'

NAMAKAGON SUNSET ROAD

G.L. 5

PREL
SURVEY BY
JASON R. I
PLS - 309



Karl Kastrosky
Land Development & Zoning Consultant

14295 McNaught Rd. Cable, WI 54821

715-580-0157

Kastrosky821@gmail.com

To Whom it may concern,

I hereby authorize **Karl Kastrosky** to act as my agent to procure permits and
access information pertaining to my property at 44295 NAMAKAGON SUNSET RD.
in the Town of CABLE County of BAYFIELD.

Steve Backlund
Signature

8/29/20
Date

My contact information is:

Address: AS ABOVE

Phone: 309-696-0030

Email: STEVEBACKLUND@COMCAST.NET

\$100 2-25-21

Bayfield County Impervious Surface Calculations

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

Property Owner(s): <i>STEVE & TOMI BACKLUND</i>				
Mailing Address:		Property Address <i>CABLE, WI. 54821</i> <i>44295 NAMARAGOY SUNSET RD.</i>		
Legal Description: <i>PAR 14</i> <i>NW, SW 1/4, NE, SW 1/4,</i> <i>V. 868 P. 587</i>		Section, Township, Range Sec <i>14</i> Township <i>43</i> N, Range <i>7</i> W		
Authorized Agent/Contractor <i>Karl KASTROSKY</i>		Gov't Lot	Lot #	CSM#
Lot(s) #	Block(s) #	Subdivision		Town of: <i>NAMARAGOY</i>
Parcel ID # (PIN #) <i>04-012-2-43-07-14-3 01-000-30000</i>		Tax ID # <i>23945</i>		Date: <i>9/30/2020</i>

Impervious Surface: An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed and maintained to be pervious.

Calculation of Impervious Surface: Percentage of impervious surface shall be calculated by dividing the surface area of existing and proposed impervious surfaces on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark by the total surface area of the lot or parcel, multiplied by 100.

Impervious Surface Standard: Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

Existing Impervious Surfaces: For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:

- Maintenance and repair of all impervious surfaces:
- Replacement of existing impervious surfaces with similar surfaces within the existing building footprint;
- Relocation or modification of existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance, and meets the applicable setback requirements in Section 13-1-32.

19 W 210 39986 FT

Impervious Surface Item

Dimension

Area (Square Footage)

Existing House	49' x 81' IRREGULAR	3,979
Existing Accessory Building/Garage + SHED	36' x 80' w/ 10' APRON	3,240
Existing Sidewalk(s), Patio(s) & Deck(s)	20' x 30'	600
Existing Covered Porch(es), Driveway & Other Structures	680' x 15'	10,200
Proposed Addition/House		
Proposed Accessory Building/Garage		
Proposed Sidewalk(s) & Patio(s)		
Proposed Covered Porch(es) & Deck(s)		
Proposed Driveway		
Proposed Other Structures	BOAT HOUSE 19' x 21'	230 WITH EAVES
Total:		18,249

- a. Total square footage of lot: 13.89171582 ACRES X 43,560 = 609,600.56 FT² 1 PM
- b. Total impervious surface area: 18,249
- c. Percentage of impervious surface area: $100 \times (b)/a =$ ~~28~~ 3%

If the proposed impervious surface area is greater than 15% mitigation is required.

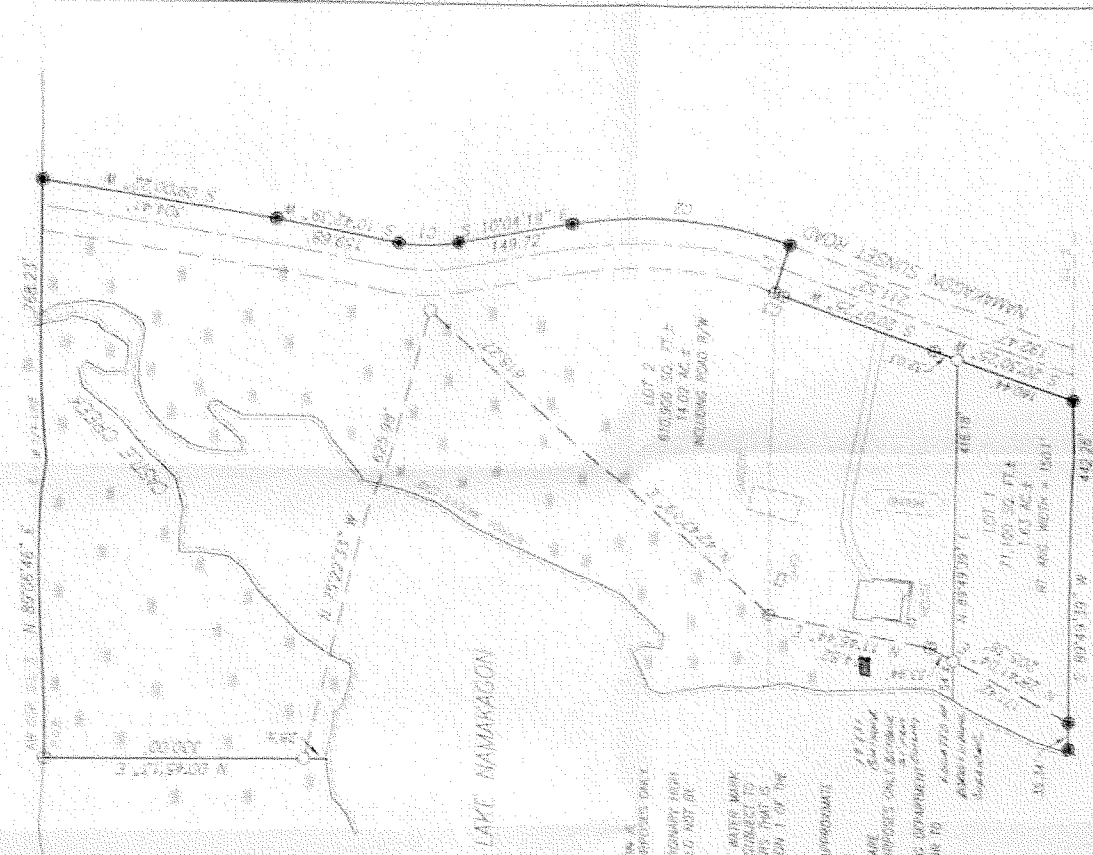
Total square footage of additional impervious surface allowed:

@ 15% 91,440
(73,152)

@ 30% 182,880
~~146,360~~

Issuance Information (County Use Only)		Date of Inspection:
Inspection Record:		Zoning District (R-1) Lakes Classification (1)
Condition(s): <u>Large Land Holding</u>		Stormwater Management Plan Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Signature of Inspector: <u>[Signature]</u>		Date of Approval: <u>3/10/21</u>

DAYFIELD COUNTY CERTIFIED SURVEY MAP NO. LOT 1 AND 2 OF GCM NO. 512, RECORDED IN VOL. 3 OF GCM ON PAGES 357 & 358 AND OTHER LAND LOCATED IN CONCURRENT LOT 5, SECTION 7, T. 43 N., R. 5 W., IN THE TOWN OF NAMADAGON, DAYFIELD COUNTY, WISCONSIN.



NOTES:
 THE BAYFIELD EDGE OF LAKE NAMADAGON IS APPROXIMATE, AND FOR REFERENCE PURPOSES ONLY. DUE TO UNDER CUTS AND TO THE OVERSHOOT HIGH WATER LINE OF LAKE NAMADAGON, LOT 2 MAY BE DEFORMED.
 ANY LAND BELOW THE OVERSHOOT HIGH WATER MARK OF A LAKE OR NAVIGABLE STREAM IS SUBJECT TO THE PUBLIC TRUST IN NAVIGABLE WATERS THAT IS ESTABLISHED UNDER ARTICLE I OF THE STATE CONSTITUTION.
 LOT AREAS ARE CALCULATED TO THE APPROXIMATE WATER'S EDGE OF LAKE NAMADAGON.
 THE UNDEVELOPED WETLANDS SHOWN ARE APPROXIMATE AND FOR REFERENCE PURPOSES ONLY. BOUNDARY LINES SHOWN ARE APPROXIMATE.
 CONTACT THE DAYFIELD COUNTY ZONING DEPARTMENT FOR FURTHER INFORMATION PRIOR TO PLANNING OF CONSTRUCTION.

LINE TABLE

LINE	BEARING	DISTANCE
1-1	N. 73°08'18\"	45.70'

CURVE TABLE

STATION	ARC	CHORD	CHORD BEARING	CHORD DISTANCE
1+00.00	18.27'	215.29'	S. 07°25'18\"	217.42'
2+00.00	36.54'	430.58'	S. 07°25'18\"	434.84'
3+00.00	54.81'	645.87'	S. 07°25'18\"	652.26'

LEGEND
 • BOUNDARY CORNER
 - - - - - UNDEVELOPED WETLANDS
 - - - - - APPROXIMATE UNDEVELOPED WETLANDS

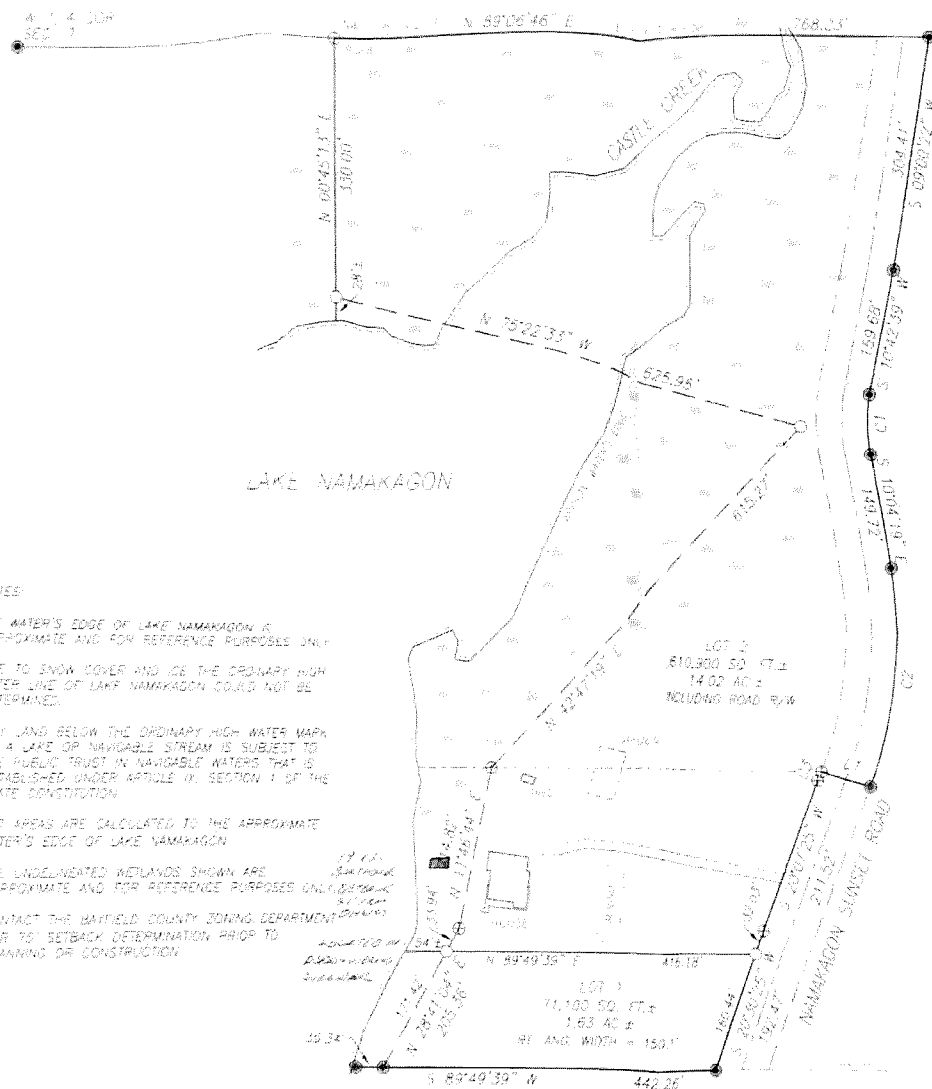
CLIENT: BOULDER TRUST
 AGENT: JASON P. NELSON
 SCALE: 1" = 200'
 DRAWN BY: JPN
 DATE: 08/20/2024

HEART OF THE NORTH
 SURVEYING OF HAYWARD, INC.
 10000 S. 100TH AVE.
 SUITE 100
 HAYWARD, WI 53422
 PHONE: 765-854-4444
 FAX: 765-854-4444

PRELIMINARY
 SURVEY BY: JASON P. NELSON
 PLS. 3092



BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. ...
 2057 AND 1 OF DSM NO. 511, RECORDED IN VOL. 3 OF DSM ON PAGES
 357 - 358 AND OTHER LAND LOCATED IN GOVERNMENT LOT 5, SECTION 7,
 T. 43 N., R. 5 W., IN THE TOWN OF NAMAKAGON, BAYFIELD COUNTY, WISCONSIN.



4032

THE WATER'S EDGE OF LAKE NAMAGAGON IS APPROXIMATE AND FOR REFERENCE PURPOSES ONLY.

DUE TO SNOW COVER AND BE THE DEEPER HIGH
WATER LINE OF LAKE MINNAPACKON COULD NOT BE
DETERMINED.

ANY LAND BELOW THE ORDINARY HIGH WATER MARK
OF A LAKE OR NAVIGABLE STREAM IS SUBJECT TO
THE PUBLIC TRUST IN NAVIGABLE WATERS THAT IS
ESTABLISHED UNDER ARTICLE IX, SECTION 1 OF THE
STATE CONSTITUTION.

ALL AREAS ARE CALCULATED TO THE APPROXIMATE
WATER'S EDGE OF LAKE VANAMONGON

THE UNDEVELOPED WETLANDS SHOWN ARE APPROXIMATE AND FOR REFERENCE PURPOSES ONLY.

CONTACT THE HAYFIELD COUNTY ZONING DEPARTMENT
FOR 75' SETBACK DETERMINATION PRIOR TO
PLANNING OR CONSTRUCTION

LINE		BEARING		DISTANCE	
1	N 75° 09' 04" W	68.70			

TIME	AGE	RA/RUS	DETA	CHORD BEARING	CHORD DISTANCE
01	18.27	235.83	10.00 4A	5 3025.18 E	77.92
02	23.18	548.00	10.05 5B	5 02 19.95 N	281.35
03	19.17	544.73	8.10 5A	5 74 03.07 N	17.77

PRELIMINARY
SURVEY BY JASON R. NELSON
PLS - 5092

SCALE: ONE INCH = 100 FEET



SECRET

1. FOUND 1.4' FROM SURF. 1.133.67
 2. FOUND 1' FROM SURF
 3. 1.1' FOUND 1.1' FROM SURF. WT. 1.133.67
 4. UNRECORDED DATA
 5. APPROXIMATE ADJUDICATION METHODS

CLIENT GOLLEFO TRUST

199 WS 418/127
MALE, 11 x 700
DRAUGHT BY 1974
AGE WS 1096 2. 82

FILE M/T4 44-38861-30-1
1040 1018 022
1000 1018 022
1011 1018 022

HEART OF THE NORTH
SURVEYING OF HAYWARD, INC.

[illegible]

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0131** Issued To: **Steve & Tomi Backland / Karl Kastrosky, Agent**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **7** Township **43** N. Range **5** W. Town of **Namakagon**

N of line in

Gov't Lot **5** Lot Block Subdivision CSM#

For: **Residential Accessory Structure: [1- Story; Boathouse (19' x 21') = 399 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build as proposed and by FEMA standards. Abide by use of boathouse as per ordinance.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

May 25, 2021

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



Permit #:	21-0145
Date:	5-27-21
Amount Paid:	\$175 4-28-21
Refund:	

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Owner's Name: ROBINZ NEST, LLC - TAMARA KLOHN				Mailing Address: 2537 ORCHARD LN				City/State/Zip: WHITE BEAR LAKE, MN 55110				Telephone: 651-308-3096			
Address of Property: 44645 BAY DRIVE				City/State/Zip: CABLE, WI								Cell Phone:			
Contractor:				Contractor Phone:				Plumber:				Plumber Phone:			
Authorized Agent: (Person Signing Application on behalf of Owner(s))				Agent Phone:				Agent Mailing Address (include City/State/Zip):				Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No			
PROJECT LOCATION		Legal Description: (Use Tax Statement)		Tax ID# 24536		PARCEL# 38407		Recorded Document: (Showing Ownership)							
1/4, 1/4		Gov't Lot 2		Lot(s) 2		CSM 2143		Vol & Page 12 313		CSM Doc # 2020R-585816		Lot(s) #		Block #	
Subdivision:															
Section 10		Township 43		N, Range 6		W		Town of: NAMAKAGON		Lot Size 33, 128 ft		Acreage .76			

<input checked="" type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : 75 feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: CONVENTIONAL	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input checked="" type="checkbox"/> CRAWL	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input checked="" type="checkbox"/> Run a Business on Property VACATION RENTAL		<input checked="" type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>		<input checked="" type="checkbox"/> Year Round		<input type="checkbox"/> Compost Toilet	
					<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length: 28	Width: 22	Height: 15
Proposed Construction: (overall dimensions)	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/>	Principal Structure (first structure on property) EXISTING	(28 X 22)	616
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
		with a Deck	(X)	
<input type="checkbox"/> Commercial Use		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	(X)	
	<input checked="" type="checkbox"/>	Accessory Building (explain) _____	(18 X 22)	396
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input checked="" type="checkbox"/>	Other: (explain) VACATION RENTAL	(X)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Tamara Kohn Date 4/19/21
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: _____ Date _____
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 2537 ORCHARD LN, WHITE BEAR LAKE, MN 55110
Attach Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of:

Proposed Construction
- (2) Show / Indicate:

North (N) on Plot Plan
- (3) Show Location of (*):

(*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show:

All Existing Structures on your Property
- (5) Show:

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*):

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*):

(*) Wetlands; or (*) Slopes over 20%

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	Feet		
Setback from the South Lot Line	Feet	Setback from Wetland	Feet
Setback from the West Lot Line	Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		
Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.			
Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.			

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number: 5674	# of bedrooms: 2	Sanitary Date: 11-5-80
Permit Denied (Date):		Reason for Denial:		
Permit #: 21-0145		Permit Date: 5-27-21		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:				Zoning District (R-1)
				Lakes Classification (1)
Date of Inspection: 4/30/21		Inspected by: ADP		Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.)				
• Maintain Public Health Licensures				
• Maintain Town Rooming Taxes				
• Abide To Town Rental Conditions				
Signature of Inspector: ADP				Date of Approval: 5/18/21
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

TOWN BOARD RECOMMENDATION - - (CLASS A - SPECIAL USE)

When **Town Board** has completed this form, please mail to:

Bayfield County Planning and Zoning Department
P.O. Box 58 – Washburn, WI 54891
Phone – (715) 373-6138
Fax – (715) 373-0114
e-mail: zoning@bayfieldcounty.org

Website:
www.bayfieldcounty.org/147



Date Zoning Received: (Stamp Here)

RECEIVED
MAY 18 2021

Bayfield Co. Zoning Dept

Property Owner(s) are responsible to give this form to the Town Clerk. **Attach a copy** of the **County Application (8 1/2 x 14)** [front/back]. This is a **Class A** special use request. **Note:** The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. Ask Town if you should be present at their meeting(s).

Property Owner ROBINZ NEST, LLC Contractor _____
CHRIS AND TAMERA KLOHN
Property Address 44645 Bay Drive Authorized Agent _____
CABLE, WI 54821 Agent's Telephone _____
Telephone 651-308-3096 Written Authorization Attached: Yes () No ()

Accurate Legal Description involved in this request (specify **only** the property involved with this application)

_____ 1/4 of _____ 1/4, Section 10, Township 43 N., Range 6 W. Town of NAMAKAGON

Govt. Lot 2 Lot 2 Block _____ Subdivision _____ CSM# 2143

Volume 12 Page 314 of Deeds Tax I.D.# 24536 Acreage .76

Additional Legal Description: _____

Applicant: (State what you are asking for) SPECIAL USE - VACATION RENTAL Zoning District: _____ Lakes Classification: _____

We, the Town Board, TOWN OF NAMAKAGON, do hereby recommend to

☐ Table

☒ Approval

☐ Disapproval

Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan: ☒ Yes ☐ No

Township: (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

SEE ATTACHED STIPULATIONS

** THE FOLLOWING **MUST** BE INCLUDED WITH THIS FORM:

1. The Tabled, Approval or Disapproval box checked
2. The Town's reasoning for the tabling, approval or disapproval
3. The form returned to Zoning Department **not a copy or fax**

**** NOTE:**

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

Revised: November 2017

Signed:

Chairman: [Signature]

Supervisor: [Signature]

Supervisor: [Signature]

Supervisor: [Signature]

Clerk: [Signature]

Date: 5-11-21

Conditions to be placed on short term rentals in the Town of Namakagon.

“No other structures or vehicles, permanent or temporary can be placed on the property for human habitation or business until this short term vacation rental permit is terminated.

This includes but is not limited to travel trailers, motor homes, tents, tent campers, and house boats.

Rental Criteria (For Short Term Rentals)

1. Obtain necessary permits. (See procedure)
2. Room Tax must be paid to Town Board.
3. Must have an inspected and approved sanitary system.
4. No RV's pop-up campers, tents, or other means of overnight stays allowed.
5. All vehicle and trailer parking must be contained on private driveway. (not on grass or on road).
6. All camp fires must be attended and extinguished by 11:00 PM
7. Quiet hours are from 11:00 PM to 7:00 AM
8. Pets must be restricted to rental property.
9. Property line delineation must be agreeable with both neighbors.
10. Contact number(s) must be for a person within 10 miles of property and must be available 24 hours per day.
11. Property must remain free from citations, nuisances, disorderly conduct, or any other type of illegal activity.
12. Land use, DNR and town regulations/ ordinances are included in rental information.
13. Occupancy limits set by the town are adhered to.
14. You are knowledgeable about your permits and transfer rights.
15. Garbage and recycling materials should be properly disposed of on a daily basis. Garbage containers must be kept out of the public's view except for garbage pickup day.
16. Trespass laws must be abided by at all times,
17. Fireworks by town permit only.

All of these criteria must be met by the owner. Suspension or revocation of your permit is a possibility if not followed.

(Revised 9/2018)

Bayfield County, WI



Description Updated: 1/29/2021

Tax ID: 24536
PIN: 04-034-2-43-06-10-2 05-002-17000
Legacy PIN: 034105906000
Map ID:
Municipality: (034) TOWN OF NAMAKAGON
STR: S10 T43N R06W
Description: PAR IN GOVT LOT 2 IN DOC 2020R-585222 369G
Recorded Acres: 0.400
Calculated Acres: 0.401
Lottery Claims: 0
First Dollar: No
Zoning: (R-1) Residential-1
ESN: 123

Tax Districts Updated: 3/15/2006

STATE
 COUNTY
 TOWN OF NAMAKAGON
 SCHL-DRUMMOND
 TECHNICAL COLLEGE

Recorded Documents Updated: 3/15/2006

WARRANTY DEED
 Date Recorded: 11/3/2020 **2020R-585222**
WARRANTY DEED
 Date Recorded: 10/16/2007 **2007R-516957 984-466**
CONVERSION
 Date Recorded: **347-324**

HISTORY [Expand All History](#) White=Current Parcels Pink=Retired Parcels

24536 This Parcel ↑ Parents ↓ Children
Tax ID: 38406 **Pin:** 04-034-2-43-06-10-2 05-002-18100
Tax ID: 38407 **Pin:** 04-034-2-43-06-10-2 05-002-17100

*Bernice Masch → Paul Schmidt 1981
 AKA " Tonnsen (?345-435?)*

4662-PS 80 #5674

2 Bed Rm ? Ownership

Ownership Updated: 11/19/2020

ROBINZ NEST LLC WHITE BEAR LAKE MN

Billing Address: **ROBINZ NEST LLC**
 2537 ORCHARD LN
 WHITE BEAR LAKE MN 55110
Mailing Address: **ROBINZ NEST LLC**
 2537 ORCHARD LN
 WHITE BEAR LAKE MN 55110

Site Address * indicates Private Road

N/A

Property Assessment Updated: 11/9/2007

2020 Assessment Detail

Code	Acres	Land	Imp.
G1-RESIDENTIAL	0.400	190,100	35,000

2-Year Comparison

	2019	2020	Change
Land:	190,100	190,100	0.0%
Improved:	35,000	35,000	0.0%
Total:	225,100	225,100	0.0%

Property History

Child Properties Tax ID
[04-034-2-43-06-10-2 05-002-18100](#) [38406](#)
[04-034-2-43-06-10-2 05-002-17100](#) [38407](#)

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY – **5674 (11/5/1980)**
SIGN –
SPECIAL – **Class A**
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **21-0145** Issued To: **Robinz Nest LLC**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **10** Township **43** N. Range **6** W. Town of **Namakagon**

Gov't Lot Lot **2** Block Subdivision CSM# **2143**

For: **Residential Other: [1 – Unit: 1 - Story; Short-term Rental]**

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Maintain public health licensures. Maintain Town rooming taxes. Abide to Town rental conditions. Town Conditions: No other structures of vehicles permanent or temporary can be placed on property for human habitation or business until this short-term vacation rental permit is terminated. This includes but not limited to travel trailers motorhomes tents tent campers and house boats.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

May 27, 2021

Date